Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION	FOR EXTENSION OF TIME UNDER 37	Docket Number (Optional)		
(Fees	FY 2009 pursuant to the Consolidated Appropriations Act, 200	1975.0180003/TJS/T-M/M-N		
Application Number 10/761,435			Filed January 22, 2004	
For Pusion Constructs and Use of Same to Produce Antibodies With Increased Fc Receptor Binding Affinity and Effector Function				
Art Unit 1633			Examiner Burkhart, Michael D.	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$130	\$65	\$
X	Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ <u>490</u>
	Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$
	Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$
	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
X Payment by credit card. Form PTO-2038 is attached.				
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number19-0036				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
x attorney or agent of record. Registration Number 41,306				
attorney or agent under 37 CFR 1.34				
mustly Suf 10/26/2009				
/Signature // Date				
Timothy J. Shea, Jr. Typed or printed name			(202) 371-2600 Telephone Number	
Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one				
signature is required, see below.				
	of forme are			

LXI Total of I forms are submitted.

This collection of Information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the Into conscion or information is required by 3 of LPR I. 196(b). The information is required to Codes or require a selective field with 8 of the factor of the Codes of the Cod FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.